HEIGHT AND WEIGHT

Indicator	STEPS	CINDI	CARMEN	BRFSS
Whether following programme/ activities to lose or maintain weight			8.3 Are you currently on some kind of program or being treated to control your weight or is there something that you are doing to keep from gaining weight? 1.Yes 2.No	*3. Are you eating either fewer calories or less fat to...* *lose weight?* *keep from gaining weight?* *1 Yes, fewer calories* *2 Yes, less fat* *3 Yes, fewer calories and less fat* *4 No* *5 Don't know/Not sure* *6 Refused* *4. Are you using physical activity or exercise to...* *lose weight?* *keep from gaining weight?* *1 Yes* *2 No* *- Don't know/Not sure* *- Refused*
Last time weighed			*8.4 When was the last time you weighed yourself?* *1. 1 year ago or less* *2. 1-2 years ago* *3. More than 2 years ago* *4. Don't recall/not sure* *5. I've never weighed myself*	
Amount thinks should weigh			*8.6 How much do you think you should weigh?* *1. Weight in kg __* *2. I don't know/not sure*	
Desired weight			*8.7 How much would you like to weigh?* *1. Weight in kg __* *2. Don't know/not sure*	*5. How much would you like to weigh?* *-__ Weight pounds* *-Don't know/Not sure* *-Refused*
Opinion of weight		*6.3 In your opinion, are you?* *-underweight?* *-normal weight?* *-overweight?* *-do not know*		

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HEIGHT AND WEIGHT				
Indicator	**STEPS**	**CINDI**	**CARMEN**	**BRFSS**
Awareness of where to get help to lose weight			*8.8 If you, a family member or friend decided or wanted--or you were recommended--to lose weight, do you know a place where you could go to get counseling/help with how to go about losing weight?* *1. Yes* *2. No* *-Don't know/not sure*	

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HEIGHT AND WEIGHT

Indicator	STEPS	CINDI	CARMEN	BRFSS
Height		[1]6.1 How tall are you? |___| cm		[2]13.11 About how tall are you without shoes? - / __ Height ft/inches -Don't know/Not sure -Refused
Current weight		6.2 How much do you weight in light clothing? |___| kg	*8.5 How much do you think you weigh?* *1.Weight in kg __* *2.I don't know/not sure*	13.10 About how much do you weight without shoes? -__ __ __ Weight/pounds -Don't know/Not sure -Refused
Health advice received about weight			8.1 Have you ever been told by a doctor, nurse or other health professional that your weight is a problem, that you are obese, overweight or weigh more than you should? 1.Yes 2.No 3.Don't recall/not sure	[3]*6. In the past 12 months, has a doctor, nurse, or other health professional given you advice about your weight?* *1.Yes, lose weight* *2.Yes, gain weight* *3.Yes, maintain current weight* *4.No* *-Don't know/Not sure* *-Refused*
Whether currently trying to lose weight			8.2 Are you currently trying to lose weight? 1.Yes 2.No	*1. Are you now trying to lose weight?* *1 Yes* *2 No* *- Don't know/Not sure* *- Refused*
Whether trying to avoid gaining weight				*2. Are you now trying to maintain your current weight, that is to keep from gaining weight?* *1 Yes* *2 No* *- Don't know/Not sure* *- Refused*

[1] *Height, weight and physical activity*
[2] *Demographics*
[3] *Module 11: Weight Control*

STEPS: Questions from "Expanded" section in italics. All others are "core" questions.
CINDI: Questions in italics are "highly recommended" questions. All others are "obligatory".
CARMEN: Optional questions are in italics, all others are "core" questions.
BRFSS: Questions in italics come from optional modules or are state-selected questions. All others are "core" questions.

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